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Comments:**Attorney Docket No: 41514-20003.03**

U.S. Patent Application Serial No. 10/781,989

For: METHOD FOR PRODUCING IMMUNOGLOBULINS CONTAINING
PROTECTION PROTEINS AND THEIR USE

By: Andrew C. HIATT et al.

Examiner: A. R. Salimi

Group Art Unit: 1648

Our Reference: 41514-20003.03

DOCUMENTS ATTACHED:

1. Transmittal - 1 pg.
2. 1.312 Amendment - 5 pgs.
3. PTOL-85 Form - in duplicate, 2 pgs.

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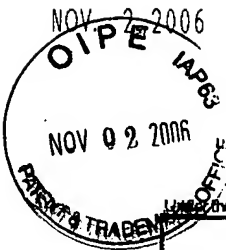
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/781,989
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		First Named Inventor	Andrew C. HIATT
		Art Unit	1648
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Total Number of Pages in This Submission	8	Attorney Docket Number	415142000303

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final - (1,312 Amendment, 5 pgs.) <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. PTOL-85 Form (in duplicate, 2 pgs.)
Remarks: Fax Cover Sheet is attached to this filing, but not counted as part of this submission.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
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Printed name	Patricia Tsao	
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